



Virginia Fire Service Needs Assessment Survey - 2008

This survey will provide updated statistical information to policy makers in Virginia on the needs of Virginia's fire service. It will also provide important resource information that can be used to plan for disaster response. All survey data will be compiled and the results will be published in January 2009 in Volume V of the Virginia Fire Service Needs Assessment.

Each fire department in Virginia has been issued a password which will allow access to the questionnaire on-line. Multiple responses from a single department will not be possible. The first submission will be the only response accepted by the survey website.

Also, while completing the survey, you will have the option of saving your answers and can return later to finish completing your response. (Clicking "Next" on each page will save your answers.)

The estimated time needed to complete the entire survey is approximately 20 minutes. If you do not know the answer to a question, you may mark "Don't know", if available. Questions that show a "Key" symbol are required.

A copy of all survey questions is available on our website, www.vafire.com, if you want to review the questions before completing the survey on-line. Click on Fire Data & Statistics and then Needs Assessment.

If you have any questions regarding the completion of this survey, please contact:

Dwight E. Crews
Fire Research Analyst
Virginia Department of Fire Programs
Information and Statistics Section

by phone at (804) 249-1989 or

by email at dwight.crews@vdfp.virginia.gov.

1. Please enter your survey password.

Please use the blank space to write your answers.

2. Fire Department FDID:

Please use the blank space to write your answers.

3. Fire Department Name:

Please use the blank space to write your answers.

Contact Information

4. Name of Person Completing Survey:

Please use the blank space to write your answers.

5. Contact Phone Number:

Please use the blank space to write your answers.

6. Contact Email Address:

Please use the blank space to write your answers.

Section I - General Department Information

7. Please review your fire department's contact information shown below.

Please use the blank space to write your answers.

Address 1

.....

Address 2

.....

City, State, Zip

.....

Phone Number (Non-Emergency)

.....

Fax Number

.....

Primary Department Email Address

.....

Current Fire Chief

.....

8. Please verify that the above contact information for your fire department is correct.

Please pick one of the answers below.

- ☐ Yes - All Contact Information Correct
- ☐ No - Contact Information Incorrect - Changes Needed

9. Please specify any corrections to your fire department's contact information below. (Click the back button to go back and review your contact information.)

Please use the blank space to write your answers.

Address 1

Address 2

City, State, Zip

Phone Number (Non-Emergency)

Fax Number

Primary Department Email Address

Current Fire Chief

10. Fire Department Website: (Complete only if your department has a website.)

Please use the blank space to write your answers.

11. Fire Department Status:

Please use the blank space to write your answers.

12. Please select from the following list if your fire department status needs to be updated or if no change is needed to the above information.

Please pick one of the answers below.

- ☐ Career (Fire Service)
- ☐ Volunteer (Fire Service)
- ☐ Combination (Fire Service)
- ☐ No Change Needed

13. Please specify the type of department that you are reporting on this survey.

Please pick one of the answers below.

- ☐ City Fire Department
- ☐ County Department - Career Personnel Only
- ☐ County Department - Career and Volunteer Personnel
- ☐ Local Fire Department

14. Number of fire departments / stations within your organization reported with this survey: (All responses to survey questions should be reflective of this group of fire departments or fire stations.)

Please use the blank space to write your answers.

15. Please specify the name and physical address for each fire department / station in your organization.

Please fill in the answers in the table below (mark appropriate circles and squares and fill in the blank spaces).

	FDID (If Applicable)	Department / Station Name	Physical Address	City, State, Zip
Fire Dept / Station #1
Fire Dept / Station #2
Fire Dept / Station #3
Fire Dept / Station #4
Fire Dept / Station #5
Fire Dept / Station #6
Fire Dept / Station #7
Fire Dept / Station #8
Fire Dept / Station #9
Fire Dept / Station #10

If your organization has more than 10 departments / stations, please attach a file(.doc,.xls,.txt or .pdf formats) listing the name and physical address for each department or station. Click the Browse button to select the location of your file.

16. Is the area your department has primary responsibility to protect (exclude mutual aid areas) primarily urban, suburban, or rural?

Please pick one of the answers below.

- ☐ Urban
- ☐ Suburban
- ☐ Rural

17. Department Population Protected: Number of permanent residents your department has primary responsibility to protect (exclude mutual aid areas):

Please pick one of the answers below.

- ☐ 0 - 999
- ☐ 1,000 - 2,499
- ☐ 2,500 - 4,999
- ☐ 5,000 - 9,999
- ☐ 10,000 - 24,999
- ☐ 25,000 - 49,999
- ☐ 50,000 - 99,999
- ☐ 100,000 Or More

18. Department Coverage Area: Number of square miles your department has primary responsibility to protect (exclude mutual aid areas):

Please pick one of the answers below.

- ☐ 0 - 24
- ☐ 25 - 49
- ☐ 50 - 74
- ☐ 75 - 99
- ☐ 100 - 199
- ☐ 200 - 299
- ☐ 300 Or More

Section II - Department Personnel

19. Please indicate the total number of active firefighters by status in your department. (The total at the bottom should be the total number of firefighters in your department.)

Please use the blank space to write your answers.

Career Firefighter

.....

Volunteer Firefighters

.....

Paid-per-call Firefighters

.....

Total

.....

20. What is the average number of fire fighters (career, volunteer, or paid-per-call) on duty and available to respond to a call?

Please use the blank space to write your answers.

.....

21. Please indicate the total number of civilian (non-firefighting) personnel by type with your department. (The total at the bottom should be the total number of civilian employees in your department.)

Please use the blank space to write your answers.

Civilian - Paid

.....

Civilian - Volunteer

.....

Total

.....

22. Does your department have a program to maintain basic fire fighter fitness and health as recommended by NFPA 1500?

Please pick one of the answers below.

- ☐ Yes
- ☐ No
- ☐ Don't Know

23. Does your fire department currently have the following personnel programs?

Please fill in the answers in the table below (mark appropriate circles and squares and fill in the blank spaces).

	Does your department have the program?	If "Yes", describe the program.
Recruitment Program	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know
Retention Program	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know

Section III - Facilities & Apparatus

24. What is the age of fire stations within your department? Please answer each age category shown below with a percentage (%) of your stations. (The total at the bottom should add to 100%.)

Please use the blank space to write your answers.

0 - 9 Years

.....

10 - 19 Years

.....

20 - 29 Years

.....

30 - 39 Years

.....

40 Or More

.....

Total

.....

25. What percentage (%) of your fire stations have backup power?

Please pick one of the answers below.

- ☐ All Fire Departments (100%)
- ☐ Most (75% to 99%)
- ☐ More than Half (50% to 74%)
- ☐ Some (25% to 49%)
- ☐ Few (1% to 24%)
- ☐ None

26. Please indicate the total number of each type of apparatus that your department owns. (Complete all that apply.)

Please use the blank space to write your answers.

Aerial Apparatus (Tiller, Straight, Tower)

Aircraft Rescue and Fire Fighting (ARFF) Vehicle

Ambulance / Other Patient Transport

Command Vehicle

Engine / Pumper

Quint Combination Vehicle

Rescue / Fire Boat

Tanker

Technical Rescue Vehicle

Wildland Brush Truck

Other

27. Please indicate the total number of each type of equipment that your department owns. (Complete all that apply.)

Please use the blank space to write your answers.

Chemical / Biological Sample Analysis Equipment

Map Coordinate System - GPS

Mobile Data Terminals

Personal Alert Safety Systems (PASS)

Personal Protective Equipment (PPE)

Radios

Self-Contained Breathing Apparatus (SCBA)

Technical Rescue Equipment - Confined Space

Technical Rescue Equipment - Rope

Technical Rescue Equipment - Structural Collapse

Technical Rescue Equipment - Trench

Technical Rescue Equipment - Vehicle

Technical Rescue Equipment - Water

Thermal Imaging Cameras

Other

28. What are the number of buildings in your area that are 4 or more stories in height?

Please pick one of the answers below.

- ☐ None
- ☐ 1 - 5 Buildings
- ☐ 6 - 10 Buildings
- ☐ 11 Or More
- ☐ Don't Know

29. What is the height of the tallest building and the depth of the deepest sublevel basement in your coverage area? (Please record your answer in number of stories.)

Please use the blank space to write your answers.

Tallest Building - Stories Above Grade

Deepest Sublevel - Stories Below Grade

30. Please answer if your facility is shared with any other separate organizations? (Check all that apply.)

Please check all that apply and/or add your own variant.

- ☐ Emergency Medical Services (EMS) Agency
- ☐ Law Enforcement Department (Police, Sheriff)
- ☐ Forestry Department
- ☐ No Other Organizations within Facility

Other

Section IV - Operating Budget Information

31. What percentage (%) of your budget is from the following sources? (The total at the bottom should add to 100%.)

Please use the blank space to write your answers.

Fire district or other taxes

Payments per call

Local govenment funding

State government funding

Federal government funding

Fundraising (e.g., donations, raffles, suppers, events)

Other

Total

32. What percentage (%) of your current apparatus was purchased or donated? (The total at the bottom should add to 100%.)

Please use the blank space to write your answers.

Purchased New

Purchased Used

Donated New

Donated Used

Converted Vehicles

Other

Total

33. What was the funding source for your apparatus that was purchased? (Check all that apply.)

Please check all that apply and/or add your own variant.

- ☐ Local government funding
- ☐ State government funding
- ☐ Federal government funding
- ☐ No Apparatus was Purchased

Other

34. How soon do you expect the need to replace the following apparatus? (Check all that apply.)

Please fill in the answers in the table below (mark appropriate circles and squares and fill in the blank spaces).

	Within 1 Year	Within 5 Years	Within 10 Years
Aerial Apparatus (Tiller, Straight, Tower)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Aircraft Rescue and Fire Fighting (ARFF) Vehicle	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ambulance / Other Patient Transport	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Command Vehicle	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Engine / Pumper	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quint Combination Vehicle	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rescue / Fire Boat	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tanker	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Technical Rescue Vehicle	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wildland Brush Truck	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

35. How soon do you expect the need to replace the following equipment? (Check all that apply.)

Please fill in the answers in the table below (mark appropriate circles and squares and fill in the blank spaces).

	Within 6 Months	Within 1 Year	Within 5 Years
Chemical / Biological Sample Analysis Equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Map Coordinate System - GPS	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mobile Data Terminals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal Alert Safety Systems (PASS)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal Protective Equipment (PPE)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Radios	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-Contained Breathing Apparatus (SCBA)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Technical Rescue Equipment - Confined Space	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Technical Rescue Equipment - Rope	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Technical Rescue Equipment - Structural Collapse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Technical Rescue Equipment - Trench	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Technical Rescue Equipment - Vehicle	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Technical Rescue Equipment - Water	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Thermal Imaging Cameras	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Section V - Communications

36. Can you communicate by radio with other agencies in which you regularly need to respond with at an incident scene? (Check all that apply.)

Please check all that apply.

- ☐ Local
- ☐ State
- ☐ Federal
- ☐ Don't Know

37. What frequency spectrum does your department operate on?

Please pick one of the answers below or add your own.

- ☐ Low Band (30 - 50 Mhz)
- ☐ High Band (147 - 174 Mhz)
- ☐ Ultra Band (450 - 470 Mhz)
- ☐ 700 Mhz
- ☐ 800 Mhz

Other

.....

38. What percentage (%) of your apparatus have mobile radios assigned?

Please pick one of the answers below.

- ☐ All (100%)
- ☐ Most (75% to 99%)
- ☐ More than Half (50% to 74%)
- ☐ Some (25% to 49%)
- ☐ Few (1% to 24%)
- ☐ None

39. What percentage (%) of your apparatus have a portable radio assigned to each riding position?

Please pick one of the answers below.

- ☐ All (100%)
- ☐ Most (75% to 99%)
- ☐ More than Half (50% to 74%)
- ☐ Some (25% to 49%)
- ☐ Few (1% to 24%)
- ☐ None

40. What percentage (%) of your radios have an emergency alert button?

Please pick one of the answers below.

- ☐ All (100%)
- ☐ Most (75% to 99%)
- ☐ More than Half (50% to 74%)
- ☐ Some (25% to 49%)
- ☐ Few (1% to 24%)
- ☐ None

41. Who has primary responsibility for dispatch operations?

Please pick one of the answers below or add your own.

- ☐ Fire Department
- ☐ Law Enforcement Department (Police, Sheriff)
- ☐ Combined Public Safety Agency
- ☐ Communication Department

Other

.....

42. What percentage (%) of your apparatus are equipped with a GPS Map Coordinate System?

Please pick one of the answers below.

- ☐ All (100%)
- ☐ Most (75% to 99%)
- ☐ More than Half (50% to 74%)
- ☐ Some (25% to 49%)
- ☐ Few (1% to 24%)
- ☐ None

43. What percentage (%) of your departments have internet service? (The total at the bottom should add to 100%.)

Please use the blank space to write your answers.

Dial-up Internet

.....

High Speed Internet (Cable, Satellite, Wireless, etc.)

.....

No Internet Service

.....

Total

.....

44. Are you using your incident data for department decision making?

Please pick one of the answers below.

- ☐ Yes
- ☐ No
- ☐ Don't Know

Section VI - Fire Department Roles / Training

45. Please answer if your department has personnel designated and responsible for the duties associated in the following roles or if you have no designated officers. (Check all that apply.)

Please check all that apply.

- ☐ Health & Safety Officer
- ☐ Incident Reporting Officer
- ☐ Public Fire & Life Safety Educator
- ☐ Public Relations Officer
- ☐ Training Officer
- ☐ No Designated Officers

46. Is your Public Fire & Life Safety Educator classified as Career or Volunteer?

Please pick one of the answers below.

- ☐ Career
- ☐ Volunteer

47. Please answer the two questions below based on the following listed fire service training areas.

Please fill in the answers in the table below (mark appropriate circles and squares and fill in the blank spaces).

	Is this a role that your department performs?	If "Yes", how many of your personnel who perform this duty have received formal training (not just on-the-job).
Aircraft Rescue & Firefighting (ARFF)	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Emergency Medical Services (EMS)	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Hazardous Materials Response (HAZMAT)	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Structural Firefighting	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Technical Rescue - Confined Space	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Technical Rescue - Rope	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Technical Rescue - Structural Collapse	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Technical Rescue - Trench	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None

Technical Rescue - Vehicle	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Technical Rescue - Water	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Wildland Firefighting	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None

48. How many of your active firefighters (career, volunteer, paid-per-call) have received National Incident Management System (NIMS) training?

Please fill in the answers in the table below (mark appropriate circles and squares and fill in the blank spaces).

	Percent of active firefighters
ICS-100 Introduction to Incident Command System	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
ICS-200 Basic Incident Command System	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
ICS-300 Intermediate Incident Command System	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
ICS-400 Advanced Incident Command System	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
IS-700 National Incident Management System (NIMS), An Introduction	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
IS-800 National Response Plan (NRP), An Introduction	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None

49. Does your jurisdiction mandate firefighter certification (VDFP / Pro-Board)?

Please pick one of the answers below.

- ☐ Yes
☐ No
☐ Don't Know

50. How many of your active firefighters (career, volunteer, paid-per-call) are certified in the following areas?

Please fill in the answers in the table below (mark appropriate circles and squares and fill in the blank spaces).

	Percent of active firefighters
Advanced Life Support (EMT-Enhanced, EMT-Intermediate, or EMT-Paramedic)	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Basic Life Support (First Responder or EMT-B)	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Emergency Vehicle Operations	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Fire Apparatus Driver / Operator	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Fire Investigator	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Fire Officer	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Fire Prevention Inspector	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Firefighter Level I	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None

Firefighter Level II	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
HAZMAT Awareness	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
HAZMAT Operational	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
HAZMAT Specialist	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
HAZMAT Technician	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None
Public Fire & Life Safety Educator	<input type="radio"/> All Personnel (100%) <input type="radio"/> Most (75% to 99%) <input type="radio"/> More than Half (50% to 74%) <input type="radio"/> Some (25% to 49%) <input type="radio"/> Few (1% to 24%) <input type="radio"/> None

51. Please answer the following questions regarding your activities with a Regional Technical Rescue Response Team.

Please fill in the answers in the table below (mark appropriate circles and squares and fill in the blank spaces).

	Yes	No	Don't Know	If "Yes", how many people are assigned to your team?
Does your department participate in a Regional Technical Rescue Response Team?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

52. Please answer the following questions regarding Emergency Medical Services (EMS).

Please fill in the answers in the table below (mark appropriate circles and squares and fill in the blank spaces).

	Yes	No	Don't Know	If "Yes" what classification of EMS license does your department hold?
Is your department licensed by the Virginia Department of Health, Office of Emergency Medical Services as an EMS agency?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Non-Transport First Response, Basic Life Support <input type="radio"/> Non-Transport First Response, Advanced Life Support <input type="radio"/> Ground Ambulance, Basic Life Support <input type="radio"/> Ground Ambulance, Advanced Life Support

Section VII - Fire Prevention & Code Enforcement

53. Which of the following programs or activities does your department conduct? (Check all that apply.)

Please check all that apply and/or add your own variant.

- ☐ Free distribution of home smoke / heat / CO alarms
- ☐ Juvenile firesetter program
- ☐ Permit approval
- ☐ Plans review
- ☐ Routine testing of active systems (fire sprinkler, detection/alarm, smoke control)
- ☐ School fire safety education program based on a national model curriculum

Other

54. Who conducts fire code inspections in your community? (Check all that apply.)

Please check all that apply and/or add your own variant.

- ☐ Building Department
- ☐ Full-time Fire Department Inspectors
- ☐ In-Service Fire Fighters
- ☐ Separate Inspection Bureau
- ☐ State Fire Marshal's Office

Other

55. Who determines if a fire was deliberately set in your area? (Check all that apply.)

Please check all that apply and/or add your own variant.

- ☐ Fire Department Fire Investigator
- ☐ Incident Commander Or Other First-In Fire Officer
- ☐ Police Department
- ☐ Regional Arson Task Force Investigator
- ☐ State Arson Investigator

Other

56. Does fire investigation data become readily available to your department after an incident?

Please pick one of the answers below.

- ☐ Yes
- ☐ No
- ☐ Don't Know

Section VIII - Your Fire Department's Top Needs

57. Please rank your department's Top Needs from 1 to 5 for Fiscal Year 2009. (1 - Most Important Need, 5 - Least Important Need)

Each row for Apparatus, Equipment, Facilities, Personnel and Training should only have 1 answer choice. Also, each column (#1 - #5) should be used only once.

(For Example, if Apparatus is the Most Important Need with your Fire Department, then select # 1. Then, select the next Top Need, such as Training, as your # 2 choice. Each number should only be used once. You cannot have more than one Top Need listed with #1.)

Please mark the corresponding circle - only one per line.

	# 1 (Most Important)	# 2	# 3	# 4	# 5 (Least Important)
Apparatus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Facilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personnel	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

58. Please indicate your departments estimated costs for Fiscal Year 2009 for each type of specific department need.

Please fill in the answers in the table below (mark appropriate circles and squares and fill in the blank spaces).

Matrix: part 1 of 2

	Apparatus	Equipment	Facilities	Personnel
Estimated Costs	<input type="radio"/> No Funding Needed <input type="radio"/> \$1 - \$24,999 <input type="radio"/> \$25,000 - \$49,999 <input type="radio"/> \$50,000 - \$74,999 <input type="radio"/> \$75,000 - \$99,999 <input type="radio"/> \$100,000 - \$249,999 <input type="radio"/> \$250,000 - \$499,999 <input type="radio"/> \$500,000 - \$749,999 <input type="radio"/> \$750,000 - \$999,999 <input type="radio"/> \$1,000,000 Or More	<input type="radio"/> No Funding Needed <input type="radio"/> \$1 - \$24,999 <input type="radio"/> \$25,000 - \$49,999 <input type="radio"/> \$50,000 - \$74,999 <input type="radio"/> \$75,000 - \$99,999 <input type="radio"/> \$100,000 - \$249,999 <input type="radio"/> \$250,000 - \$499,999 <input type="radio"/> \$500,000 Or More	<input type="radio"/> No Funding Needed <input type="radio"/> \$1 - 24,999 <input type="radio"/> \$25,000 - \$49,999 <input type="radio"/> \$50,000 - \$74,999 <input type="radio"/> \$75,000 - \$99,999 <input type="radio"/> \$100,000 - \$249,999 <input type="radio"/> \$250,000 - \$499,999 <input type="radio"/> \$500,000 - \$749,999 <input type="radio"/> \$750,000 - \$999,999 <input type="radio"/> \$1,000,000 - \$2,499,999 <input type="radio"/> \$2,500,000 - \$4,999,999 <input type="radio"/> \$5,000,000 Or More	<input type="radio"/> No Funding Needed <input type="radio"/> \$1 - \$24,999 <input type="radio"/> \$25,000 - \$49,999 <input type="radio"/> \$50,000 - \$74,999 <input type="radio"/> \$75,000 - \$99,999 <input type="radio"/> \$100,00 - \$249,999 <input type="radio"/> \$250,000 - \$499,999 <input type="radio"/> \$500,000 - \$749,999 <input type="radio"/> \$750,000 - \$999,999 <input type="radio"/> \$1,000,000 - \$2,499,999 <input type="radio"/> \$2,500,000 - \$4,999,999 <input type="radio"/> \$5,000,000 - \$9,999,999 <input type="radio"/> \$10,000,000 Or More

58. Please indicate your departments estimated costs for Fiscal Year 2009 for each type of specific department need.

Please fill in the answers in the table below (mark appropriate circles and squares and fill in the blank spaces).

Matrix: part 2 of 2

	Training
Estimated Costs	<input type="radio"/> No Funding Needed <input type="radio"/> \$1 - \$24,999 <input type="radio"/> \$25,000 - \$49,999 <input type="radio"/> \$50,000 - \$74,999 <input type="radio"/> \$75,000 - \$99,999 <input type="radio"/> \$100,000 - \$249,999 <input type="radio"/> \$250,000 - \$499,999 <input type="radio"/> \$500,000 Or More

59. Please check the specific type of apparatus that your department needs for Fiscal Year 2009 and also indicate a quantity needed. (Check and complete all that apply.)

Please fill in the answers in the table below (mark appropriate circles and squares and fill in the blank spaces).

	Apparatus Needed	Quantity Needed
Aerial Apparatus (Tiller, Straight, Tower)	<input type="checkbox"/>
Aircraft Rescue and Fire Fighting (ARFF)	<input type="checkbox"/>
Ambulance / Other Patient Transport	<input type="checkbox"/>
Command Vehicle	<input type="checkbox"/>
Engine / Pumper	<input type="checkbox"/>
Quint Combination Vehicle	<input type="checkbox"/>
Rescue / Fire Boat	<input type="checkbox"/>
Tanker	<input type="checkbox"/>
Technical Rescue Vehicle	<input type="checkbox"/>
Wildland Brush Truck	<input type="checkbox"/>
No Apparatus Currently Needed	<input type="checkbox"/>
Other	<input type="checkbox"/>

60. Please check the specific type of equipment that your department needs for Fiscal Year 2009 and also indicate the quantity needed. (Check and complete all that apply.)

Please fill in the answers in the table below (mark appropriate circles and squares and fill in the blank spaces).

	Equipment Needed	Quantity Needed
Chemical / Biological Sample Analysis Equipment	<input type="checkbox"/>
Map Coordinate System - GPS	<input type="checkbox"/>
Mobile Data Terminals	<input type="checkbox"/>
Personal Alert Safety Systems (PASS)	<input type="checkbox"/>
Personal Protective Equipment (PPE)	<input type="checkbox"/>
Radios	<input type="checkbox"/>
Self-Contained Breathing Apparatus (SCBA)	<input type="checkbox"/>
Technical Rescue Equipment - Confined Space	<input type="checkbox"/>
Technical Rescue Equipment - Rope	<input type="checkbox"/>
Technical Rescue Equipment - Structural Collapse	<input type="checkbox"/>
Technical Rescue Equipment - Trench	<input type="checkbox"/>
Technical Rescue Equipment - Vehicle	<input type="checkbox"/>
Technical Rescue Equipment - Water	<input type="checkbox"/>
Thermal Imaging Cameras	<input type="checkbox"/>
No Equipment Currently Needed	<input type="checkbox"/>
Other	<input type="checkbox"/>

61. Please check the specific type of facilities that your department needs for Fiscal Year 2009. (Check all that apply.)

Please check all that apply and/or add your own variant.

☐ Improvements/Remodeling of Existing Station/s

☐ Installation of Backup Power

☐ New Constructed Station/s

☐ No Facilities Currently Needed

Other

62. Please check the specific type of personnel that your department needs for Fiscal Year 2009 and also indicate the quantity needed. (Check and complete all that apply.)

Please fill in the answers in the table below (mark appropriate circles and squares and fill in the blank spaces).

	Personnel Needed	Quantity Needed
Firefighter - Paid	<input type="checkbox"/>
Firefighter - Volunteer	<input type="checkbox"/>
Civilian - Paid	<input type="checkbox"/>
Civilian - Volunteer	<input type="checkbox"/>
No Personnel Currently Needed	<input type="checkbox"/>
Other	<input type="checkbox"/>

63. Please check the type of training that your department needs for Fiscal Year 2009. (Check all that apply.)

Please check all that apply and/or add your own variant.

- ☐ Aircraft Rescue & Firefighting Training
- ☐ Emergency Medical Services (EMS) Training
- ☐ Emergency Vehicle Operations Training
- ☐ Fire Apparatus Driver / Operator Training
- ☐ Fire Fighter Training
- ☐ Fire Investigator Training
- ☐ Fire Officer Training
- ☐ Fire Prevention Inspector Training
- ☐ Fire Services Instructor Training
- ☐ Hazardous Material Incident Training
- ☐ ICS-100 Introduction to Incident Command System
- ☐ ICS-200 Basic Incident Command System
- ☐ ICS-300 Intermediate Incident Command System
- ☐ ICS-400 Advanced Incident Command System
- ☐ IS-700 National Incident Management System (NIMS), An Introduction
- ☐ IS-800 National Response Plan (NRP), An Introduction
- ☐ Public Fire & Life Safety Education
- ☐ Technical Rescue - Confined Space
- ☐ Technical Rescue - Rope
- ☐ Technical Rescue - Structural Collapse
- ☐ Technical Rescue - Trench
- ☐ Technical Rescue - Vehicle
- ☐ Technical Rescue - Water
- ☐ Virginia Fire Incident Reporting System (VFIRS) Training
- ☐ Wildland Firefighting Training
- ☐ No Training Currently Needed

Other

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Final Comments

64. Do you feel that this survey addresses all of your department needs?

Please pick one of the answers below and add your comments.

☐ Yes

☐ No

Comments

.....

65. Do you think that this survey is beneficial to fire service in Virginia?

Please pick one of the answers below and add your comments.

☐ Yes

☐ No

Comments

.....

66. Please rate if you disagree/agree with the following statements on the overall performance of this survey.

Please mark the corresponding circle - only one per line.

	Disagree			Neutral			Agree
Easy to Understand Questions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Simple to Complete Response On-line	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

67. Please complete any final comments about the survey:

Please write your answer in the space below.

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Click here to review your survey response. You can print your answers from here, but you still need to return and click submit to send you survey.